136
241 laying during the little and big rains. But there are many variations.) When it comes, the farmer tries to scare it away by setting fire to fallow fields, stubble, bush and trees.

136 Other wild creatures familiar to the Amhara are Migrating birds which fly north (to "Jerusalem" in the popular mind, actually to Europe) in March and return in October, including the "zorit", a white-bellied, black-backed, red-winged bird, and a variety of stork, called "asa leqami". The Nile Monitor, ("ardjano"), a huge lizard is found along larger rivers, often not far from villages and even towns, and easy to hunt. With its scaly skin and often large size, it resembles a crocodile, with dark stripes and spots on a very white underside.
[28] The skin is used to cover better utensils and is exported as "crocodile leather" for bags and shoes. Actual crocodiles are much harder to hunt, in less accessible river gorges in the lowlands. The Guenon Monkey (Ṭoṭa) is common on lower
[23] elevations(where it is also a danger to crops). Its young are sometimes made pets.

136 Insect life is abundant in Ethiopia, varies in type according to elevation, and bears considerable significance to ecology.

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164 Flies - abundant everywhere, transmitting intestinal and skin infections. They are not interfered with beyond swishing with the fly-switch which, if kept in constant motion, chases but does not kill them.

Fleas ("quneṭcha") are very common on humans. Everyone has them most of the time, even in the city.

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They are considered a minor irritation, and are caught and crushed between the finger nails. Sometimes, fleas are carriers of typhus, causing epidemics.

Lice - are not as common on humans, and are associated, in the Amhara view, with unusually insanitary conditions, such as prisons.

Bedbugs ("tenkushit"), of the bloodsucking variety, are very common.

Ticks and mites - are more common and more dangerous in the lowlands, but are also found on the plateau where they cause relapsing fever, endemic in many areas. Ticks also bear typhus.[10]

Mosquitoes ("ḳhenqello", or, "tenên") include 22 species of the Anopheline variety in Ethiopia, are abundant below 4,000 feet, in river valleys and along flooded margins of lakes, where serious fatal malaria epidemics occur from time to time. Thousands died just north of Lake Tana within a few weeks after the rainy season of 1953. The Amhara describes the mosquito as a little insect with a big head; it flourishes at the end of the rainy season.

136 Ants: "gundan", black ant with painful bite;
"gäbrä gudan", black field ant which eats grain but does not sting;
"zämämit", small red ant with painful sting;

10. Simmons, op. cit., 1951, pp. 62-73.

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wild blueberry - "agam", very common; with thorny twigs, resembling the sloe tree; found not far from rivers, on the woyna dega.

wild fig tree - "shola", or "warka", giant tree (ficus sycomorus) with small but very sweet fruit.

"qamma" - fruit resembling raisin, turns brown when ripe, sour, consumed as mild laxative.

mushroom - "enguday", or "anguday", with white bottom. Rarely eaten.

"awut" - common, reddish or white fruit of a nettle bush, of very low prestige and consumed only in time of famine; gathered in early dry season (Mäskäräm to Ter).

Only lemons are consumed publicly without shame. They are purchased on the market. Bananas from the lowlands are also available to urban people, or "great men" who can afford them. Observers have suggested that the common nose-bleeding of Amhara may result from a Vitamin C deficiency, due to little fruit consumption.

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Collecting also provides such necessities as wild cotton in more remote areas (e.g. the Magnza district of Wolqait). Every housewife uses leaves of the "lola" bush in which to bake the festive bread "dabbo".

Wild honey is obtained from the wild bee called "tazzema" (Apis africans miaia), and used against colds as well as "heart ailments". More commonly, honey for making the alcoholic drink "tej", is obtained from a small, tiny-stinged bee (Apis dorsata), but since many of the bees are killed when they are smoked out, this process, too, is one of collecting rather than bee culture.

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252 262 the last a few minutes before the wot is ready. Some add capsicum at the same time.

Liver and stomach, especially of sheep and goat, are eaten, but spleen and milt are considered hard to digest and are given to dogs. In general, interior organs are not prestigeful.

Raw beef, "brundo", is still featured at special feasts such as weddings, religious feasts like "täzkär", [164] as it was featured at feasts of warriors in the past. This brings much tapeworm infection, but the risk is taken because it is believed that "brundo" makes strong like no [755] other food. The painful purgative cure is undergone every two months with "kosso", still a major institution among the Amhara.

To cool the palate linings and tongue from the bärbäre, curdled milk, "ergo", is consumed right afterwards. [515] Hands are carefully washed, for touching the eyes with fingers stained from the spiced stew makes them smart.

Fish, much eaten only in the rainy season, is also boiled in wot, often after slight prefrying in talba (linseed oil); lentils (mesr) are often added.

Lentils become very important in the long lenten season and on every Wednesday and Friday, when the average [784] Amhara still abstains from meat, milk, eggs and other animal products, for religious (Coptic fast) reasons. The staple food during these periods is a porridge called "shero": mashed peas seasoned with spices, onion and vegetable oil.

Another vegetarian staple is "nefro", consisting of peas, chick peas, sorghum, all boiled and eaten as ker-

515 may last 9 months, there is very little bathing, and only hands are washed, in muddy water brought from the river or
514 brook, before and after meals. There are no latrine ditches. Feces are deposited behind thorny bushes 1/4 mile from the hamlet at most, while urination at night proceeds within the hamlet. This practice is followed even in towns and in Addis Ababa. Fortunately the strong sun carbonizes the feces in the dry season, and the strong rain in that season sweeps it away. There is no caste of sweepers, and no attention is paid to human or animal feces, except for the manure of oxen and cows. The latter is hand-pressed into cakes and used as fuel.

364 Hyenas, jackals and vultures are not interfered
825 with, as their services in removing carcasses of animal origin are well appreciated.

165 Abundant sunlight during 9 months of the year, coupled with the scanty clothing of small children, probably gives them their best chance of survival in addition to the long breast-feeding. Nevertheless infant mortality is very high, and in an average family half the babies born die before reaching the age of 5.

164 Flea infestation of humans can be described as
136 complete. This opens the way to flea-born typhus, especially on the highland plateau. Lice are somewhat less general, since they are not regarded by the Amhara as inevitable as fleas. Thus, an Amhara whose hair is infected
136 with lice (e.g. during a stay in prisons which are always
164 lice-infected), he may shave his hair. But louse-born re-
744 lapsing fever epidemics recur from time to time, and the

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[744] government has now made free injections available at "big markets" of provincial towns, Bedbugs are also prevalent, of the bloodsucking variety. They are considered a nussance by the Amhara, but all that is done is to air the "alga" bed in the sunlight, which merely reduces the infestation temporarily. Flies are also abundant and very aggressive, so that a flyswitch ("chera") is kept in motion for comfort. Contagious diseases spread readily. Just after each rainy season, malarial mosquitoes have caused epidemics up to levels of 5,000 feet, on the shore of overflowing lakes and rivers.

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[231] In the majority of cases, some livestock is taken into the living hut (tuqul) everynight. The tuqul has, of course, an unwashable mud floor, no windows or chimney, soot-blackened ceiling, cobwebs in corners. There is no change of clothing at night, merely an added "kutta" or sheepskin, against the cold. Aside from drinking cups, there are no individual utensils.

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[543] Towns, including provincial towns, are centers for the spread of syphilis and other venereal diseases, due to the existence of entire streets of "women in-between marriages" who act as restauranteurs-prostitutes. When surface lesions appear, the native "wogasha" is consulted; or since the Italian invasion made the "needle" popular, the modern government medical personnel is approached. But patients usually cease to continue treatment when surface lesions disappear.[67]

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Eating "brundo", raw beef, at feasts, almost always leads to tapeworm and other taenia infestation. Fortunately

67. Guthe, Th: Venerial Disease in Ethiopia. W.H.O. Bulletin, Vol.2, 1949, pp. 85-138.

164 this is limited to occasional feasts due to the comparatively high cost of beef, and the "kosso" cure does seem to work. Dysentery kills many infants; amoebic dysentery sickens and kills adults also, especially near towns where the population is denser. The opening and increase in trade route communications since the Italian occupation has led to an increase in tuberculosis epidemics.[68]

312 164 Brooks, rivers and wells become increasingly more polluted as each dry season proceeds, and just after the flooding during the rainy season. Water carried long distances in skins is not safe either. The housewife, trying to manage as best as she can under the circumstances, carefully covers containers of food and drink, even of water stored overnight.

H. Mutual Aid

476 The simple living standard of the Amhara is somewhat improved by traits of mutual aid.

These may be listed in four categories, according to Amhara attitude:

(1) Mutual aid within the territorial or kinship unit, usually the hamlet;

(2) between neighboring hamlets that may or may not be kinfolk;

(3) within the religious sodality, the "mähabär";

(4) between individuals.

68. Simmons et al, Global Epidemiology, 1951. pp.62-73

e) Visiting

574 602 Visiting kinfolk regularly, during the nine months of the dry season, is a prime requirement. This includes, in this order of emphasis and frequency: patrilineal kin, matrilineal kin, affinal kin.

574 606 Visits to affinal kin are less frequent and more formal. When visiting one's parents-in-law, usually twice during the dry season, the man is not supposed to come empty-handed, but should bring a sheep as a gift. He waits outside the in-law hamlet, just beyond the thornbush enclosure, and asks the children whether his father-in-law is at home. When the latter appears, the visitor enters and approaches the hut. He enters only upon invitation. There is no mother-in-law avoidance as such, but contact is reduced to a minimum, between son-in-law and mother-in-law, to achieve maximum privacy for both.

602 Flouting kinship obligation is regarded as a shameful deviation, indicating an evil character. Kinship relations represent much security for the individual, but also involve him in serious obligations, such as aiding kinsmen in blood-feuds and reprisal-raids ("bäqqäl"). A person who wanders away from the kin hamlet, or from kin obligations, when his mood or irresponsibility carry him, is called "läqo" (after the soft reed that grows rapidly at the least rain, but drops when grown to maturity).

574 754 Visitors, particularly strangers, must observe certain taboos, lest they be suspected of bringing the evil eye. They should not ask the number of children, nor praise their health or good looks aloud. This is considered dangerous, because the "buda" spirit is always on the lookout for fat, juicy children so that he can magically "drink their blood" and make them waste away. (Children are vulnerable to many communicable diseases).

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574 576 When visiting the sick, the visitor, especially female visitors, are expected to express their sympathy in unmistakeable tones. The

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178 This attitude is of course deplored by the Western physicians who know
757 of it. But modern medical treatment is still little available outside the major towns. Patients come to hospitals often only as a last resort, fearing to be separated from kinfolk and exposed to treatment by strangers, so that mortality in hospitals is high, which reinforces
[743] the fears. At present there are probably no more than 50 hospitals in all Ethiopia, and only a few hundred Western physicians. Both are heavily concentrated in Addis Ababa, so that the field of the "woggesha" has not shrunk at all.

164 B. Common Ailments and their Treatment.
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755 The more common ailments and procedures followed by the "woggesha" and "däbtära", (practitioners who occasionally overlap in specialties but almost never in treatment), include the following (see next page):

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Table II: Bodily Ailments, Symptoms, Practitioners, Diagnoses, Treatment.

Ailment	Amharic Name	Practitioner	Diagnosis or Symptoms	Treatment
snakebite	"ebab"(snake) "gwämit", very poisonous but rare; "täwarwari ebab", lowland cave snake (also "asil"), very poisonous, but rare on plateau. "talba ebab" brownish flax-snake, common, not poisonous, but believed to be. "zämdo" (large python), not poisonous, infrequently encountered.	woggesha däbtära: prevents snakebite by writing amulet "Abuna Batra Maryam", and wrapping it in "tonätla" (mistletoe) leaves that keep snakes away. In presence of snake, lets shadow fall on it to immobilize it, saying: "He is born of virgin, without conception by a father, a and He has saved us; but it, that has misled Eve, the snake..."(which scares the snake away).	fang marks	cuts wound with razor (arab melach), also may cut flesh away. No sucking of blood for fear of poison. Stop bleeding with "let" leaves. Smears oily "nug" - cake on, for healing.
tonsilitis, chronic sore throat	"angar", or "entel" (lit. uvula)	woggesha	pain in throat, regarded as "sick uvula"	rips out part of soft palate with wire.
toothache	"lemam yazä" (lit. the rot has seized it).	woggesha	toothache	"kills the demon that bites" by inserting a caustic medicine that eats into the gum; (actually a counter-irritant).

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Ailment	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
Ear infection	"qenqen" or "qetqet"	woggeaha	diagnosed as "buzzing insect that got into patient's ear".	"kills insect in ear" by caustic drops; (actually a counter-irritant)
cough (human) (donkey)		woggeaha		drink expectorant made from aloes ("erä"). feed donkey roasted "qärcho", a yellow thistle weed that grows in plowed fields.
tuberculosis (esp. pulmonary). 30% incidence estimated by Italians.	"mäggäña" (Galla: "arwe karhamu)	däbtära	coughing blood, leaving patient limp. Diagnosed as "threshhold demon named 'mäggäña', who entered patient in early morning", or "red snake in belly".	Purgative, made of root of rhubarb "mäqmäqo" (Rumex abyssinicus), boiled in butter. Magic "sacrifice of threshhold" of chicken or goat, and fumigation of hut with "woggärt". Spraying of holy water. If all are dead, abandon the hut. (Also, cauterization with hot pin).
tapeworm (taenia saginata) Very common.	"wäsfat"	woggeaha	noticed in stool; or, prophylactic after every "brundo" (raw beef) feast; or every 2 months.	Purgative (Vermifuge) made of "kosso" (Brayera anthelmintica, Quassia amara), prepared from the dry flowers, bark and twigs of this rosacious highland tree, while swallowing a dozen "engoqo" seeds like pills. Produces a 3-day painful diarrhea.

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Ailment	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
bacterial dysentery. Very common.		woggesha	diarrhea	Only black tyeff grain may be eaten. If not cured, drink boiled leaves of "zärch embway" thistle (Solanum marginatum).
dysentery. Very common, esp. in market towns	"teqmat" (lit. what makes to sit down)	woggesha	diarrhea with blood	Purgative made of hottest "bärbärē" pepper called "mitmitta" (Capsicum abyssinicum) with smallest pods, taken in the evening together with raw beef ("brundo") after a day of complete fasting; the next morning, drink purgative kosso with enqoqo pills.
intestinal disturbances colic	angorba	woggesha	pains, much salivation	drink tea of "teferendo" bush, or of "tembälal" (Jasminum floribundum); or of "angerra" root (used also in tatooing as astringent). In mild cases, chew leaf of "tena adam" garden plant and swallow the juice.

(constipation, etc., is treated with mineral salt "agbal chäw," now with "English salt" (Epsom).

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Ailment	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
heart ailment. occasionally.	"leb bäshota" (lit. heart sickness)	woggesha	pains in heart region	antispasmotic drink made of honey of the wild bee "tazzema" (Apis Africana miaia).
conjunctivitis, trachoma, ophthalmia, eye diseases Very common.	"Näddra" or "Aynät" (female demons)	däbtära	eye inflammation, pain, incipient blindness	apply juice of "Ketketa" flower (Dodonea viscosa) by means of cotton cloth; then take vapor bath. Or use juice of aloes ("rät"). Rub wrinkled leaves of "käsyä" (resembles thyme). Wear amulet recalling Jesus breaking the spell of the demon.
headache, migraine, neuralgia. Very common.	"feltät"	woggesha däbtära		Inhale fumes of burning leaves of "woggärt" plant or "gizewa" bush(which resembles elderberry). Shave area in back of head, make small incision with horn, sucking the blood. On Mary's birthday, leave chickpeas or other food for the birds.
hemorrhoids. common.	"kentarot"	woggesha	pains, (mostly in adults)	Astringent shrinks piles; made of the juice of certain secret roots, applied daily for a week.

Ailment	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
bleeding from wounds		woggesha		apply rolled and crumbled leaf of "let" plant to wound, to stop bleeding. apply aloes ("rät") to promote formation of scar tissue.
excessive menstrual bleeding	"yädam abennät"	woggesha dabtära	diagnosed as female demon "Werzelya"	Hang magic root under garment. Root bears name of illness, drives it away. Amulets.
miscarriage	"yädam terat"	dabtära	demon Werzelya	Peel this root and wear it. Amulets
barrenness Incidence as high as 25%	"yädam tefat"	dabtära	demon Werzelya, believed to have "stopped patient's menstruation."	Specially written amulet, referring to King Susneyos' formula, hung on the neckcord.
chigger, sandflea infection. Common, esp. in dry lowland.	"moyalo"	woggesha		Pick out whole organism with needle, without breaking it.
muscular dystrophy, & other paralytic diseases.	"gwaya ankätäkkätäw" (lit. the gwaya plant has broken him).		diagnosed as due to "having walked through a field of this plant", or "having spilled water in which it was boiled, on one's leg". Symptoms: cross legged, pigeontoed walk.	No certain cure. Sometimes treated like the "mech" disease (general functional ailment).

Ailment	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
paralysis	"sefat"	woggesha dabtära	stroke, often fatal	No certain cure, Amulets.
struck by lightning	"mäbräq	woggesha dabtära	found unconcious diagnosed as "struck by thunder".	Carried to fireplace, kept warm. If patient dies, regarded as heavenly punishment, for hidden crime.
visible syphilis (early stage). Incidence syphilis 50-80% estimated by Italians.	"qiten"	woggesha dabtära	syphilitic sores	1st stage of treatment: Smear resin on sores, or "käbre" (sulphur). Intensive eating of bärbäre pepper (Capsicum abyssinicum) in order to salivate, for the disease is believed to come out with saliva; also the purgative kosso (as in cases of tapeworm), for same reason. (Magic): sacrifice male, black goat (to demon), drink its blood and eat it, for this omniverous animal has eaten a variety of herbs that may help. Then purge 4 months. 2nd stage: Sweatcure at hot springs("filowa"), dedicated to a saint, for 40 days. Refrain from salt, drink much water. In some cases, drink sarsaparilla root (Smilax mauritanica) - (possibly recent diffusion).

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Ailments	Amharic Name	Practitioner	Symptoms or Diagnosis	Treatment
chronic syphilis (including "benign syphilis" resembling Arab "bejel"; neuroe syphilis extremely rare. Chronic and inherited syphilis believed common by physicians.	"verdē"	dabtara woggesha		Prophylactic treatment obtained by some from dabtara before exposure to syphilis is kept secret, Cures include crushing of "bessana" root with Kosso, ratio 1 : 2, which is dissolved in pure barley beer "talla gebs". This purgative is believed to bring out germ with diarrhea or vomiting.
gonorrhea (common - esp. in market towns)	"cḧabet" or "chebet" (lit. it squeezes me)	woggesha	believed caused from having urinated in sunshine. Symptom: pain and urinating with difficulty.	Same cure with "bessana" root purgative as in chronic syphilis.
smallpox 6ther pox (occasional epidemics, now rarer)	"f̈antaṭa" "liṭē"	woggesha	believed caused by morning-threshhold demon "maggäña" (See tuberculosis)	Vesicant to "bring out the rash" by rubbing "kābrē" (sulphur) on sores, or, if unavailable, saffron. Patient must not touch water until healed. Neighbors wait until after 7A.M. to brink cakes of food, so that they will not encounter the morning demon "mäggäña" on threshhold.

Variolation with "kuffēñ" (mild pox or chicken pox, or taken from pus of sick person) especially in epidemics; sores are rubbed with honey.

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Ailments	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
abscess or running sore	"quncher"	woggesha	believed caused by urine of certain moth.	"bring out rash" by rubbing with sulphur or resin. Ointment made from leaves of "enqoqo" bush used as anti scabies. Purgatives made from "bessana" leaves or from juice of euphorbia candelabra ("qolqwal"), drunk in fresh barley beer.
impetigo	"chefe"	woggesha	believed caused by washing in "bad water"	"bring out rash" by rubbing with sulphur.
white sore on hand; itch.	"lekäft"	woggesha	believed caused by having left water uncovered overnight, and washing hand in it the next morning. Pain, tendons affected. Believed non-contageous.	apply astringent leaf-compresses, e.g. from the "darch embway" flower with the little red fruit; or of the "embway" (yellow thistle).
other sore on hand	"chäfe"	woggesha	believed contageous form of "lekaft"; much feared.	Cover sore with nug oil paste, and salt, to keep it from spreading.
scrofula	"näqärsa"	woggesha	symptoms on neck	"bring out rash" by rubbing with sulphur.

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Ailments	Amharic Name	Practitioner	Symptoms or Diagnosis	Treatment
leprosy (occasionally).	"lefe", "qomata", "läms"	woggesha	discoloration of skin, loss of nails, etc.	Combination of treatment of other sores. (Now treated by WHO with injection of sulphetrone, etc.).
scarlet fever (rare)	"lash"	woggesha dabtära	Peeling skin, sometimes falling hair, in children. Believed caused by female demon that specializes in hurting children.	"bring out rash" by applying sulphur to the itchy skin. Dabtara provides prophylactic as well as curative amulet against this demon.
typhus fever; If epidemic: "tässebo" (common in highlands)	"tälalafi bäsheta", "yänäfs bäsheta"	dabtära	Believed caused by certain demons.	Amulets. (Now free injections and immunization by government "dressers" at town markets).
relapsing fever (Fatality higher than typhus; louse-born in highland, tick-born in lowland).	"mech" or "mechdär"	dabtära woggasha	Patient believed struck by the demon of "hot fog", ("mech gättaw"). Same term used for sunstroke, and pneumonia. Symptoms include headaches, vomiting, violent fever, soon fatal. Illness believed brought on by sunstroke or eating spicy foods or green corn without washing mouth.	Febrifuge prepared from roasted "halgäb" plant (which resembles mint), collected with great secrecy in the bush. "Mech mädhänit" (lit. Mech medicine) also uses other plants, the leaves of which are squeezed, and the juice is drunk, sniffed, and rubbed over body, with formulas being pronounced (magic)

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Ailments	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
malaria (common below 5000 ft. endemic below 3000 ft; epidemics in lowland market towns.	"nedad" (lit. burn) "tekwesat" (fever, generic) "woba" (boil)	woggesha	fever	Patient drinks febrifuge made from min-like herbs boiled in butter. Band with cold water placed on head.
rheumatism (common)	"qerṭemat"	däbtära	believed caused by "buda" evil spirit if believed due to possession by "lasy zar"	Drive evil spirit away with disagreeable odor of "chegaun" plant stuffed in nose. Bribe the "adbar" outdoor zar spirit or the "qolä" zar with sacrifice of food.
		zar doctor		
arthritis or deforming rheumatism	"rih"	priest		Rebaptize patient at holy well ("täbäl"); or advise him to go to a hot mineral spring dedicated to a saint ("filowa") for sweat cure.
rickets	"tela"	däbtära	swelling of bony joints; believed caused by demon of evil eye.	Amulet.
yellow jaundice	"wof zorräbbat" (lit: the bird turned directions over him	däbtära	skin discoloration, thick urin.	Amulet.

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Ailments	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
puerperal fever	"tekwesat" (generic, fever)	däbtära	believed caused by female, jealous, demon "Karina".	Amulet reciting victory of Solomon over Karina.
delirium	"buda" (evil spirit)	däbtära	believed due to "buda" possession.	Intoxicant drug "astänaser" Thornapple Jimsonweed (Datura stramonium) (lit. that which makes to talk) is drunk by patient so that he reveals the name of the specific evil spirit; then it can be exorcised.
epilepsy	"yäbarya bäsheta" "yabuda basheta" (evil spirit disease)	däbtära	spasms, convulsions.	Same treatment as in delirium and rheumatism, or both.
	(haut gal) "ganyen yazä (lit. the djinn have seized him) "ebd" (have enslaved him)		running amok, violent	Cast out "ganyen" by spells and exorcism. Or eat intoxicant paste of "assärkush täbbätäbkush" (Cissus adenautha) root. Exorcism of "buda" or "ganyen".
(St. Vitus)	"nägärgar", or naqatqat"			

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Ailments	Amharic name	Practitioner	Symptoms or Diagnosis	Treatment
hysteria	"zar" (spirit, benign or evil)	zar doctor	(see zar cult) and "buda"	(see zar cult); Stimulant "aṣe faris" (stramoine datura) (lit. wood of Persia) is often preliminary treatment. The effect is agitated somnambulism, enabling patient to see the future, and the (evil) spirits that have attached themselves to him; esp. the "ayn̈ tela" (lit. shadow eye), usually in shape of a woman, who spoils well-laid plans. Once her name is revealed, däbtära throws cold water on patient to reawaken.
chronic apathy (catalepsy)	"Tegerteya" (female demon)	zar doctor däbtära	(see zar cult) and "buda"	(see zar cult) and "buda"
insanity	"Waddegeni" (female demon)	zar doctor	(see zar cult)	(see zar cult)
amok			(see "ganyen")	

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woods of the Abyssinian highlands very much, being of lowland desert origin themselves.

They can fly, dive, have hands that are strong as iron, and are wiser than humans. But their social institutions are not much better than man's. Their children must go to school to learn, just like human children. Their social hierachy is much like that of Abyssinia, with kings, chiefs, chamberlains, and a servant class. They have wars among themselves in which they can be killed by other, stronger and shrewder zars. Even their individual personalities may have serious shortcomings: generally a distinction is made between small-statured, evil, ignorant, very dark-skinned zars, and tall, noble, educated, light-skinned zars. The latter resemble their ancestors, while the others have degenerated. The zars are divided into ethnic groups and religions, so that there are Christian, Muslim, Falasha and pagan zars. They are curious about humans of other religions, e.g. a Christian zar may "possess" a human who is Muslim and make him act and dress like a Christian (and vice versa). Diseases, especially functional and mental ailments, emanate from the zars, but so do the remedies.

The superhuman attributes of the "zar" spirits are largely in achievements of material culture, in which the human Amhara is so little developed; in non-material aspects of culture, such as governing society, and in personality, no greatly superior level is visualized. No human being is considered entirely invulnerable to "zar" possession, not even foreigners. Moreover, "mild possessions" hit every human some time during a lifetime, though this may pass with relatively little notice.

X 794 repression and penalty, for no layman can know whether or not it is
756 the spirit who speaks through the doctor in any given situation.

X 794 The most frequent types of mental afflictions which the "zar"
164 doctor is called upon to treat are forms of hysteria (mostly in women), catatonic states (also mostly in women), and violent forms of possession including epileptic states (mostly in men). But he also treats some functional ailments, notably rheumatism, which is believed to have been caused by a "lazy zar" who wants his "horse" to stay in one place.

X 794 Though every person is considered a potential "horse" for a zar,
776 certain personality types are considered particularly vulnerable to
753 possession by evil zars: persons with sad, returing, melancholic natures; women who feel unloved and neglected by their husbands and thus offer little resistance to a male "zar lover"; persons who wish to escape, e.g. chronic drunkards.

X 794 Apathy, leading to catatonic states if not treated, indicates
753 incipient possession by an evil zar. The patient, often a woman,
758 withdraws into a corner, sits there huddled up, refuses to accept food. Until a zar doctor can be persuaded to come and take on the case, family and friends try to give the patient first aid. For, if she were to remain long in this state, it is believed that her zar" could "ride" her to death. Therefore, relatives and neighbors come quickly, sing to the patient, entertain her, promise her whatever her heart desires, and generally try to create a merry atmosphere. Finally they try to lure the patient into watching them dance, and try to raise the patient playfully, so as to join them. The patient is never left alone until the doctor comes.

1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

X 794 ●164 753

Psychotic cases among women usually assume a domineering male personality, such as believing themselves to be the ruthless Emperor Theodore, or the bloody Ras Mikael of Tigre. The zar doctor, however, elicits the confession of a "zar", so that he can treat the case.

Hysteria is believed mostly due to possession by female zars, who are more mischievous, silly and irresponsible than evil. If such a female zar possesses a male patient, he will manifest characteristics regarded as feminine, such as silly gaiety, and teasing behavior. If not "awakened" quickly, such a state may become chronic and gradually destroy his masculinity. More common is hysteria among women, in which case the possession manifests itself as reversion to infantile behavior: the patient talks babytalk, skips about like a young goat and shamelessly demands little gifts even from strangers and passers-by. The patient must be humored, given gifts or at least promises, for the zar, speaking through the patient, may say: "If you don't give me this, I will kill my horse" (the patient).

839

Violent forms of possession may manifest themselves by aggression directed against the patient himself, such as beating himself, hitting the head against the wall, eating dirt, trying to climb the wall, wanting to run out at night to roam with hyenas. In some cases, if accompanied by nosebleed, or "weeping blood", this is diagnosed as "buda" and becomes a case for the däbtära practitioner. In cases of running amok, with aggression directed against others, it may be diagnosed as "ganyën" (djinn) and be treated either by the dabtara, zar doctor, or täqway sorcerer.

X 794 776 758

The most common form of possession, particularly in women, begins with a kind of incubation. The male zar possessing her is jealous of her human husband, wants her to obtain a divorce and join a zar society

zar doctor, preferably a woman like Woyzäro Sälamtew. The zar complex, to the Amhara mind, represents the shadow side of the visible human world, making it complete. Hence, just as the Coptic Christian (and also the Muslim) church emphasizes the male-dominated, patriarchal side of society, so does the zar complex represent the obverse, the female-dominated, matriarchal side of society.

This is further reinforced by the subordinate socio-psychological position of the Amhara woman. She may not enter the church. Her daily labors are largely limited to routine, manual, monotonous tasks. Only noblewomen are exempt from this social position of the "commoner" female, and therefore are not found in the zar cult - which therefore has a lower-class connotation in the basically two-class Amhara society.

Socially undistinguished, "commoner" Amhara women who chafe under their social inferiority, including women of potential talent repressed in their culture, are likely to develop ailments such as melancholia, apathy, catatonic states, migraine, or hysteria. Thus the zar doctor is called in and the patient enters the zar society.

The socio-psychological improvement, even apart from medical considerations, which the woman experiences as member of a zar - devotee society, is considerable. Once her individual "zar" has been diagnosed, she has acquired an individual "self" which is respected, acknowledged, at first within, and finally even outside the zar society. For the zar society emphasizes individualism, free expression, individual enterprise; as against the outside Amhara world which suppresses it in commoners, especially in the Amhara woman. The business enterprise of the female zar doctor and many devotees has already been described.

754 The actual name, "buda", is considered taboo, for it is dangerous
776 and might attract him, when uttered aloud. Since this spirit is
[784] always male, his name is paraphrased as "the man's eye" ("yäsäw ayn"), "shadow eye" (ayna ṭela); and a victim is paraphrased "the man's victim" ("yäsäw gällaba"). Even the term "smith" is used, sometimes indirectly, for further security. Thus, to accuse someone of sorcery, a security-minded Amhara says pointedly, in his presence: "As for me, I am not the son of a smith".

754 The first attitude toward strangers is therefore one of caution,
609 lest he be a carrier of "buda". The suspicion is confirmed if the stranger has intelligent eyes, darting eyes, shining eyes, or if he stares curiously without saying much. It is confirmed if he seems skilled manually, for then he may be a "ṭabib" (lit. trained person, technologically wise), hiding the fact that he was born into the ironsmith caste. It is less disturbing if he openly reveals himself as an ironsmith, for then he lives segregated in a hamlet of his own ethnic group, and when contact must be established for trade (purchase of iron tools and pottery), certain "precautions" against being struck by the evil eye can be taken; extra-vulnerable persons such as pregnant women can be kept from contact; and all transactions will be carried on in full daylight.

754 The "buda" is regarded as preferring to strike and feast on
776 women, especially beautiful ones, and to feed, cannibal-style, on
[609] fat, beautiful children. The stranger therefore should never praise the health or beauty of children, or of women, out loud. Mothers hide their children at the approach of a stranger. Nice new garments on a child also attract the buda, and this is one reason why children under 5, when infant mortality is highest, are given only rags to wear, and are permitted to be dirty most of the time.

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[164]

751 their happiness from showing. Eating and drinking in the open makes one
754 extremely vulnerable, because this arouses buda's greed, and at the
776 same time makes it easier to penetrate the victim's body, through the wide open mouth and unguarded nose. Therefore, old-time Amhara cover their faces when eating in front of strangers.

751 This attempt to reduce vulnerability is closely related to some
754 of the "language of the shamma" (toga). In the presence of strangers,
291 this can be draped in the fashion that indicates "reserve" - covering the mouth, or even nose and mouth, with the front section of the toga, which has been draped in a turtleneck. When travelling in strange districts, which are doubly dangerous because of cast-out buda spirits hidden by exorcisers along trails, a strong-smelling
[824] herb pushed in the nostril, is often used as a prophylactic. The most commonly used of these herbs is "tena adam" (lit. health of Adam, i.e. mankind). The mouth should be kept closed, or covered. In a fearful situation, he may say "shadow, may it not fall on me". Touching iron, considered specially "strong", also helps. Children are warned to stay away from strangers, and never to leave a baby unattended, lest "buda will eat you". The term "eat" is regularly used for buda possession (not for zar possession), for it indicates consumption.

751 Typhus ("talalafi basheta") and severe epilepsy ("yabuda basheta")
754 the latter literally ascribed to buda (lit. buda disease) are the most
174 common ailments promptly diagnosed as "buda" "eating". Evidently
● [164] Amhara doctors long ago observed that covering the mouth and nose and staying away from possibly infected strangers reduced the exposure to certain contagious diseases; they then proceeded to envelop this observation in the culture pattern, including the draping of the toga and stopping up the nose, and not eating uncovered in the presence of strangers. But they also fitted this pattern into their cosmology.

754 Spitting or coughing blood (which may be tuberculosis?) is
[164] regarded as another sure symptom of buda, especially the demon "maggana". The buda is believed to cause widespread epidemics, if he is powerful and many vulnerable victims are in the area.

776 Certain buda are believed to have very specialized "educated"
754 tastes. One likes to rob the voice of dabtara choristers who chants harmoniously in church (perhaps in revenge for the same dabtara's part-time, extracurricular activity as exorciser), whereupon the voice will begin to croak and steadily grow worse, until the singer cannot even carry a tune. When a cow gradually
[825] stops giving milk, despite a big udder, this is ascribed to the special taste of an "educated" buda.

c. Diagnosis, Treatment and Prognosis

755 Sometimes the victim declares that he has had a dream in
[753] which a certain suspected person, e.g. an ironsmith, has been "eating" him. This can become very dangerous for the accused.

The question which diagnosis has to solve is not "what's eating you?", but "who is eating you?"; for the buda spirit and sorcerer are one person.

When the exorciser appears, the "buda" reacts violently. Even apathetic patients suddenly break out in violent peals of laughter, howl like a hyena, crawl about on all fours. The exorciser begins to question the "buda" to find out his personal identity. The "buda" replies through the mouth of the victim, in a hoarse voice, which is attested by all Amhara onlookers as "not the normal voice of the victim". The diagnostic procedure is a battle of wits between the exorciser and the "buda". The

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Table 13: The Scribe as Healer: Demons, their Individual Specialities, Exorcism.

category	name of demon	demonic character	demonic disease specialty	demon's affiliation or symbol	syncretism (other demons)	dabtara amulet and counteracting principle
(1)	"Buda"	evil eye	fevers (mech mättaw); functional ailments; hysteria, catalepsy	eye with bloody-red iris; ironsmith ethnics		powerful amulet; Christian re-baptising of patient: exorcism
(1)	"Mägäna"	threshhold demon in early mourning	spitting blood (tuberculosis) through "red snake in belly". Amebic dysentery.		Buda	amulet of St. Sebastian as prophylactic smoke of "wogärt" plant which snake hates, in hut. Carry dead through hole in wall (in Gojjam), so demon cannot find way back to infect others in family. Spraying with holy water.
(1)	"Dängara Mätal"	household demon	infectious disease, highly contageous within hut. (Endangers travellers.)			amulet as prophylactic. Lure demon out of the hut through trail of chicken feathers, lemons and perfume, onto trail, where it is transferred to travellers.
(1)	"Nädara", "Ayn it"	evil eye, female demon	eye diseases, esp. ophthalmia	red eyes	Buda	amulet recalling Jesus breaking the spell of this demon

1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

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category	name of demon	demonic character	demonic disease specialty	demon's affiliation or symbol	syncretism (other demons)	dabtara amulet and counteracting principle
(1)	"Ayna Tela" (lit. Shadow Eye)	evil eye, female demon	blocks projects; blocks learning of students; causes sleepwalking; likes to attack men. Confuses protective zar spirits so they cannot help.		Zar	amulet "temherta hebuat". intoxicant plant "esa fars" (see Zar).
(1)	"Eqabe Seray"	evil eye, male demon	Various mischief; can turn himself into human figure	Non-Copt neighbors; Barya, iron-smith ethnics	Buda	Christian amulet.
(1)	"Dabbas"	Household demon	undefined illness and death; "aroused when thirsty"			Christian amulet.
(2)	"Barya"	dancing demons; their chief "Legowon" has red eyes and is "buda"	epilepsy, haut mal ("hemasa barya"), esp. in male victims.	Barya tribe of Nilotic lowlands. Symbol: tornado	Zar, Buda	Amulet with angel of fiery sword (Christian).
(2)	"Tegrida"	restless demon	epilepsy, petit mal; causes "falling-down sickness"			Christian amulet.

1: Messing E-5 (1953-1954)1957 MP5 Amhara MP5

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category	name of demon	demonic character	demonic disease specialty	affiliation of demon's; or symbol	syncretism (other demons)	dabtara amulet and counteracting principle
(3)	"Werselya"	female demon	attacks women: barreness through stopped menstruation which "prevents conception", 'yĕdam tefat); bleeding from uterus (menorrhagia); miscarriage.	Barya tribe negress		amulet with legend of her promise to Saint Susneyos. It is suspended from the Christian neckcord "mätäb".
(3)	"Karina"	female demon	attacks women who have just given birth (puerperal fever).			amulet recalling her defeat at the hands of King Solomon.
(3)	"Shotälay"	female demon, subordinate.	causes stillbirth		Zar	exorcism
(3)	"Tegerteya", "Teggerta", "Waddegeni"	female demon	attacks women after childbirth through puerperal fever or catalepsy (postnatal depression).		Zar, Buda	prophylactic amulet; quiet cooperation with Zar doctor who tries cajoling the spirit through the patient (See zar).

4: Alvarez M-5 (1520-1526) 1881
MP5 Amhara MP5

164 There are many lepers in this country, and they do not live separated from the people, they live all together; there are many people who, out of their devotion, wash them, and tend their sores with their hands.

231 There is a great quantity of honey in all the country, and the bees are not in hives, but inside the houses, where the cultivators live, clinging to the walls on the inside, where they have a mode of egress outside, and also inside they surround the house: but they do not on this account desist from dwelling in the house, because the bees go outside. There are a great number of these swarms of bees, chiefly in the monasteries, there are also many in the woods and mountains, and the men put hives near the trees and fill them with bees, and bring them in them to the houses.

346 Since no one sits in the churches, at their doors outside of them, and within the circuit, there are always a great quantity of staves with cross pieces like a .....[1] or cripple's crutch, and each one takes his staff and leans upon it as long as he is at the offices of the church. In the churches there are many effigies painted on the walls. Effigies of [532] our Lord and our Lady, and of the apostles and patriarchs, and prophets and angels, and in all the churches St. George. They have not got solid images. There are many books in [217] the churches all written on parchment, because there is no [191] paper there, and the writing and language is Tigray,[2] which is that of the first country in which Christianity began.

In this country they are not accustomed to write to one another, neither do the officers of justice write anything. All the justice that is done, and what is ordered, is by messengers and speech. I say only that I saw the property of Prester John written down on being delivered up and received.

554 There would be much fruit and much more tillage in the country, if the great men did not ill treat the people, for

[1] *Taku.* [2] *Tigia.*

8: Rey G-5 (1910-1920)1935
MP5 Amhara MP5

stout pole, from which hung huge pieces of red raw meat, covered with strips of red and gold cloth.

"These men stood closely together all along the tables and one on each side, so that the meat hung down from the poles over the tables just in front of the diners. The guests produced knives, and feeling the joint with their fingers to pick out a tender bit, rapidly sliced off strips of meat, which they put into their mouths, cutting off what would not go in quite close to their lips, an operation which, from personal experience, I know demands great skill if one's nose is not to suffer—as the cut is always made upwards.

"After ample libations of *tej* and *araki* (native mead, or hydromel and spirit) the diners filed out in perfect order, and the stage was cleared for the next party.

"The whole function had lasted nearly four hours and the Ras must have been heartily glad when it was over, for he had previously dined one instalment of 5000 warriors, and two more were to follow—between 17,000 and 18,000 in all partaking of the royal hospitality."

Broundo may be a nourishing form of diet tending to the development of warlike qualities, but its consumption has one serious drawback at all events, in that it is the cause of taenia (or tapeworm), a disease which is almost universal in the country. So much is this the case indeed that it is a recognized practice for all, high and low, to take monthly as a "taenicide" a dose of a plant known as *kousso*, which is so violent in its effects as to incapacitate the patient from work or occupation for the day.

Christians will not touch meat unless it is killed by

114 Ethiopia. Eritrea and especially Italian Somaliland had been used by the School of Tropical Medicine in Bologna as a study ground, and to this was now added the much more varied and interesting field of Ethiopian nosography. The Italian studies, amounting to over 500, have been carefully analyzed by the U. S. Technical Project in Ethiopia. With few exceptions, especially in the field of malariology, the Italian work was careless, inexact, with a tendency to unwarranted generalizations.

While a number of excellent Italian physicians worked in East Africa, it would seem that, on the whole, publication was not encouraged unless it would further the Fascist cause. It would thus not be justified to judge Italian medical work here solely on the writings of the more politically minded party members. It does, however, remain a fact that, considering the very large group of medical men who worked in Ethiopia for over five years, we have precious little exact medical information about this country.

744 759 Today, the medical services of Ethiopia are being reorganized. The Government is attempting to obtain the necessary medical personnel, build hospitals and carry out public health programs. It is still too early to judge any achievements. The problems are many and the Ethiopian Government is handicapped through the complete lack of native Ethiopian physicians. Such physicians will not be available for at least another decade.

114 During and after World War II, military authorities had reason to take an interest in Ethiopian nosography and a number of articles were published in this field; prominent among these was Manson-Bahr's "The Prevalent Diseases of Italian East Africa" (1941). The U. S. Technical Project had opportunity to make a number of its own studies and much of the following information is based on this work.

164 If one may speak of social diseases in the sense of diseases of immediate impor-

[p. 712 B]

10: Barkhuus D-5 (1944-1945) 1947
MP5 Amhara MP5

●164

Syphilis with marked skin lesions in a woman.

tance, that is, having direct influence on the social development of a country, Ethiopia has at least six such social diseases: malaria, syphilis, tuberculosis, leprosy, typhus fever and relapsing fever.

Malaria

Malaria, or "fever," has been known to occur in Ethiopia as far back as we have any descriptions from this country. Bruce encountered this disease, as did Rochet d'Hericourt (1841), who described the diseases of Shoa, and also Aubert-Roche (1845-46). Ferret and Galinier wrote graphically

[p. 713 A]

●164 in their *Voyage en Abyssinie*:

"vers la fin de la saison des pluies, l'atmosphère humide, la terre détrempée et féconde en miasme pernicieux, font du pays un séjour funeste . . . " (Tigre and Lake Tsana).

(Toward the end of the rainy season, the humid atmosphere and the soil, which is soaked and productive of a pernicious miasma, turn the country into a fatal region.)

Blanc (1869) states that Massawa is almost uninhabitable because of malaria, and that this is true, too, of the narrow, densely wooded and damp river valleys in the interior of the country. He gives the Takazze Valley a particularly bad reputation. It was known before the arrival of the Italians that most places below an elevation of 6,000 feet, especially river valleys, were likely to be malarious.

164 742 The Italians were primarily interested in settling a large group of small farmers in Ethiopia. It was, therefore, of paramount interest to them to find places where malaria would not interfere with agricultural development. A number of surveys were undertaken by first rate Italian malariologists beginning with the investigation by Lega, Raffaele and Canalis in 1936, which covered the Asmara-Addis Ababa road, the railway line from Addis Ababa to Diredawa, and parts of Italian Somaliland. In the following years intensive malarial surveys were made. Through the Malaria Institute "E. Marchiafava" in Rome, research centers were set up in Agordat and Diredawa. Much of the work was carried out under the leadership of Corradetti, who personally covered large parts of northern and northeastern Ethiopia. The British malariologist, Bagster Wilson, has recently published the results of his experiences in Ethiopia.

164 Summing up, it may be said that below 3,000 feet, near permanent collections of water, malaria is endemic. It becomes epidemic during the rainy seasons: the "big" rains from July to October, and the "small" rains in February and March. In the semi-

Ep. 713 BJ

●164 arid area of Ogaden and in the Danakil Desert, malaria is found to be endemic near permanent water, and epidemic malaria has more than decimated the populations in certain regions during the rains. Between 3,000 feet and 4,500 feet most of the malaria is seasonal with two epidemic seasons, April to June and September to November. Spleen rates up to 90 percent are by no means rare in this zone. Between 4,500 and 6,000 feet endemic malaria occurs to a lesser degree, and above 6,000 feet malaria is extremely rare, although cases have been reported.

In the northern highland *Plasmodium vivax* is the most common form, while in the southern and eastern part of the country *Plasmodium falciparum* accounts for about two-thirds of the cases. *Plasmodium malariae* has been found at least once, but is of no importance. Raffaele and Lega claim to have found a special form of *P.* 164 *falciparum* which should constitute a subspecies var. *aethiopium*. *Anopheles gam-* 136 *biae*, *A. funestus* and *A. pharoensis* are the most important vectors, but a number of other anophelines are under suspicion. *Anopheles gambiae* is, as elsewhere in Africa, by far the most serious vector. Due to its ability to breed under the most varied conditions, puddles, shallow ponds, pits, animal footprints, ditches, seepages, and borders of lakes and swamps, it is extremely difficult to eradicate.

Malaria annually takes a great many 164 lives in Ethiopia, but even more important, it debilitates the population in the regions where it is prevalent, and many deaths from intercurrent diseases are primarily due to a chronic malaria.

The Italians undertook a quinine prophylaxis on a very large scale. At the time of their defeat, over 15 tons of quinine were found in the Italian medical stores in Ethiopia.

Venereal Diseases

There can be no doubt that syphilis is an old disease in Africa. There is a descrip-

[p. 714A]

●164

Syphilitic papulae of the face and the axilla.

tion of this disease from the dark continent by Leo Africanus as early as 1515. It is not known how early syphilis appeared in East Africa, but there is every reason to believe that it has been there for centuries. Due to the apparent mildness of clinical cases and the lack of neuro-syphilis, it has been suggested, among others, by Naegelsbach (1926), that there is a relation between this "exotic" syphilis and the "bejel" from Arabia described by Hudson.

[177] It is most likely that syphilis was brought to Ethiopia by the Portuguese in the middle of the 16th century. Most of the early travelers had noticed its presence. Thus, Rochet d'Hericourt (1841) states that: "Although there are no prostitutes in Shoa, the venereal diseases are common, but not in a very malignant form." Blanc (1869) gives an interesting description of syphilis in the northern highland. Ninety percent

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●164 of the persons treated by him suffered from syphilis. It is peculiar that he saw little of what he calls "skin syphilis," which is now extremely common. Hirsch (1886) thinks that while the northern highland was infected early the disease most likely did not reach Shoa until the 19th century. He states that at the time of Rigler's travels (1852) it had apparently not yet reached the Galla country.

Today syphilis is common all over Ethiopia. It is estimated that from fifty to eighty percent of the population suffers from this disease. It would seem that the rate is lowest in Somalia and highest in Gojjam and in Addis Ababa. Little exact information is available. The U. S. Technical Project, however, was able to confirm the extremely high rates in a survey of three villages, where from 50 to 85 percent of the population was found to suffer from syphilis.

Tertiary lesions are rather rare, most likely due to the fact that life expectancy is so low, but the secondary symptoms of the skin and viscera are very common. The general manifestations are more or less pronounced. Rashes are seen of macular, papular acneiform, varicelloid, or impetiginous form. Primary syphilitic ulcers are often associated with other venereal ulcerations. Mixed infections are far more common than in Europe.

Of the other venereal diseases, gonorrhea is extremely common, as is also soft chancre. Lymphogranuloma inguinale is seen now and then, but is not important.

164 548 As elsewhere, the venereal problem in Ethiopia is intimately linked to the general social life of the people. It would seem that sex morals, as understood by occidentals, have never been particularly strict among the Amharas. It is stated by local missionaries that already at the age of sixteen the young Amhara used to begin visiting prostitutes, and that it, therefore, was quite common to find, when he was ready for marriage, at about 18, that he had acquired both syphilis and gonorrhea. While it should be pointed out that the present gov-

[p. 715A]

164 548 ernment under Emperor Haile Selassie is acutely aware of the seriousness of this problem, and seeks to educate the people to understand its dangers, corrective efforts have been severely handicapped so far by lack of trained educators and physicians.

164 We are dealing with two forms of syphilis in Ethiopia. In the urban districts and along the main highways we have an "epidemic" form, a syphilis which is being spread at a great rate of speed up and down the lines of communication. In the more isolated parts of the country the disease is also present, but in what might be called an endemic form, the larger part of the population suffering from congenital syphilis, with some imported fresh cases.

One of the most surprising facts about this congenital syphilis is that it does not seem to show up in early childhood. Among 10,000 children examined by the Italians, no clinical case of syphilis was seen, although at least 60 percent of the children's parents were syphilitic.

During the Italian occupation the venereal situation grew still worse, notwithstanding an extensive medical service. This was due to the general war conditions in the country with the constant movement from one place to another. Castellani's fantastic statements on the efficiency of the Italian preventive system have been adequately discussed by Manson-Bahr (1941). The large Italian labor forces introduced for road building were an important factor in the spread of the disease. The considerable development of the road net has been a factor of extreme importance.

Tuberculosis

There has been considerable discussion of the age of tuberculosis in Ethiopia. The earlier writers, like Bruce (1790), and Courbon (1861), either do not mention the disease, or, like Rueppell (1840) and Kirk (1843), their descriptions are so vague that no definite conclusions can be drawn. Blanc (1869) states that at Magdala scrofula, consisting of severe inflammation of

[p. 715 B]

● 164 the lymphatic glands with fistulae, was very common. He makes a point of having seen only one case of pulmonary tuberculosis. Merab (1912), physician to Menelik, does not think ten persons died yearly of this disease in Addis Ababa, while two decades later, Borra (1930) was much impressed with the amount of tuberculosis in the capital.

Little definite information is available today about tuberculosis in Ethiopia. Tuberculin tests (Mantoux) showed in the last year of the Italian occupation 35 percent positives in Shoa, 30 percent in Harar, 28 percent in Amara, and 25 percent in Galla Sidama. Of urban regions Diredawa

An Ethiopian patient exhibiting a typical case of Pott's disease.

[p. 716 A]

●164 was highest with 72 percent, followed by Addis Ababa with 52 percent. The actual number of persons tested is not known, but it was at least several thousand.

Unfortunately, there can be no doubt that pulmonary tuberculosis here, as elsewhere in Africa, is on the increase. The opening up of the country, the movement of the population during the war, and the arrival of many Europeans without proper health examination has furthered this increase, which will continue with the beginning of industrialization in the urban regions unless far-reaching measures are taken at a very early time.

The U. S. Technical Project had opportunity to observe numerous cases of open pulmonary tuberculosis, not only in the larger towns, but also in remote villages. So far there are no facilities for dealing with these sources of danger to the community. Left to itself, tuberculosis is likely to become the most important health problem in Ethiopia within the next decade.

Leprosy

Leprosy is an old disease in Ethiopia. It is mentioned by almost all the early writers. Rueppell (1840) saw it in Gondar; Rochet (1841) describes it as due to the climate; Aubert-Roche (1845-46) found it extremely common in Ethiopia; and Kirk (1843) treated 23 lepers in Ancober in 1842. Finding a number of lepers at Lake Tsana, Blanc (1869) revived the old "fish theory."

The exact number of lepers present in Ethiopia today is difficult to estimate, but is likely to run into several thousands. [743] There is a leprosy camp in Harar with about 150 lepers, and it is likely that there are about as many left in Harar town. Addis Ababa has about 300 lepers under treatment in a leprosarium, and another 200 living in a community on the outskirts of the city. No satisfactory control, however, is possible at the moment. Most of the leprosy seen is of the nodular and mixed form, but macular-anaesthetic cases are not rare. Leprosy does not endanger

[p. 716B]

164 the country at the moment. It should, however, be kept in mind, that with the opening of communication lines and increased traffic and travel, leprosy must be controlled, otherwise it will increase.

Typhus Fever

Typhus fever is known to occur in at least three forms. Classical louse-borne typhus is endemic on the high plateau. Major Ecke of the American Typhus Commission visited Ethiopia in 1944 and found that, while the occurrence of murine typhus has not been scientifically proved, it is extremely likely that this form plays an important rôle. Recently a number of cases of tick typhus have been reported from southern Ethiopia.

164 The Central Laboratory in Addis Ababa has isolated four local strains of rickettsia.
742 One of these has been constantly orchitic for 52 passages through guinea-pigs, while the other three were non-orchitic.

164 Cases fall clinically in two main groups. One has a fulminant course with a very high mortality; the other is extremely mild. The high mortality among Italian laborers in the early days of the occupation (sometimes reaching 20 percent) was no doubt due to louse-borne typhus. Fatality in hospitals in Addis Ababa ranged from five to thirty-five percent. Typhus occurs in Ethiopia in the cold, wet months of July, August and September. Surveys have shown that lousiness is almost universal.

751 During the Italian occupation a large scale vaccination campaign with Weigl vaccine was undertaken. This vaccine has recently been replaced by American vaccine, and large scale vaccination has been carried out since 1945.

Relapsing Fever

164 In 1868, relapsing fever broke out in India and Hirsch (1886) states that it may have been introduced by Napier's soldiers returning from Ethiopia. The disease is no doubt old in Africa, where it occurs in both louse-borne and tick-borne forms.

[p.717A]

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Advanced case of nodular leprosy. Total alopecia of face, no loss of hair on head.

It is likely that all relapsing fever in the highland is of the louse-borne variety. Naegelsbach (1934) points out that the Amhara seldom knew the word for tick unless he had traveled to the lowland. Considerable epidemic outbreaks of louse-borne relapsing fever have been described from northern Ethiopia around Adua, Axum, Macalle, Adigrat and Debra Tabor. I had the opportunity to observe a small epidemic a few miles outside Addis Ababa. About 75 to 100 deaths had occurred in a village before rumors of the disease reached the capital. The fatality from this disease among the untreated, badly nourished population is very high indeed, and even in hospitals in Addis Ababa it is found that the fatality is generally higher than that of typhus. The largest number of cases are admitted to the hospital in Addis Ababa from July to September.

Relapsing fever of the tick-borne variety is endemic in the Diredawa region. *Ornith-*

[p. 717B]

● 164 *odorus moubata* and *O. savignyi* are both common here. Much scientific research is needed on the relapsing fevers of Africa, and Ethiopia would offer a particularly rich field.

Of special interest in the study of the nosography of any country is the presence or absence of the important communicable diseases: plague, cholera, yellow fever and small-pox.

Plague

From Ethiopia proper only a few doubtful cases have been reported. Most of the Italian writers state that they have never seen a case of plague here. Immediately after the entry of British troops into Addis Ababa there was a report of a case of plague, but it seems now that the diagnosis was not too certain. A survey was made immediately, however, and a total of 3,000 rats were examined in the capital. At the same time 16,000 fleas were identified. It was found that the necessary carrier and carrier hosts were present in abundance. One would most likely find infected rats, if a real search was made on the Kenya border. Thus, the fact that there is no plague at the moment in Ethiopia, should not serve responsible authorities as an excuse from guarding against the disease for which the meteorological conditions are optimal over wide areas.

Cholera

Cholera came early to Ethiopia. Hirsch (1886) writes (Vol. I, page 403):

> "The outbreak in 1837 was probably the continuation of a pestilential progress from Egypt through Tripoli and Tunis, the wider ramifications of which may be seen in the epidemics that prevailed at the same time in Abyssinia, on the East Coast of Africa from Somaliland to Zanzibar, and in the Sudan countries, Khartoum, Kordofan, Darfur and Waday."

Meyer-Ahrens (1855) mentions two epidemic periods, one in 1830-31 and the other in 1836. Hirsch continues (Vol. I, page 423):

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"The outbreak on the coast of Abyssinia on October, 1865, is probably connected with the epidemic in Nubia; according to information derived from the English missionaries, who were kept in captivity by King Theodore, the disease committed great ravages in the following year (1866) in the district of Tigre and still farther into the interior of Abyssinia; and it is this epidemic that appears to have been the point of departure, as we have seen for the extension of cholera to the country of the Gallas."

There seems to have been an outbreak along the River Setit in Eritrea in 1891, and it is stated that there was cholera in Ethiopia in 1892-93, but no details on this outbreak are available.

Since 1900, no occurrence of cholera in Ethiopia is mentioned, but the country is obviously exposed to it, especially through members of its Moslem population who make pilgrimages to Mecca.

Yellow Fever

The presence of persons with sera giving positive mouse-protection tests in the area

Leprosy: nodular form with mutilated hands.

[p. 718B]

●164

Elephantiasis with secondary fungus and bacterial infection.

around Massawa (Eritrea) was shown early in the war by Mahaffy and Sams. Too little work has so far been done in Ethiopia to express any definite opinion on the occurrence of yellow fever in this country. A series of sera taken in the Jimma region proved negative, but recently a case has been described from the Dagobur region (Ogaden), and a few positive sera have been found. For practical purposes Ethiopia is in the yellow fever area of Africa.

Smallpox

164 751 Smallpox is an old disease in Ethiopia. It is possible that an outbreak of smallpox in 370 A.D. in Arabia was connected with the Abyssinian invasion of this country. Hirsch (1886) states that one of the most intense foci of smallpox is found on African soil in the countries of the Nile basin, Egypt, Nubia, Kordofan and the Abyssinian Highlands. Rochet d'Hericourt (1841) describes the variolation practised in Shoa at the time of his visit:

> "They take pus from a sick person and make an incision on the leg of the person to receive the variolation. The virus is introduced into the incision, which is then covered with cotton."

[Cp.719A]

● 164 Aubert-Roche (1845-46) also describes smallpox as an important disease and Courbon (1861) states that few Abyssinians are seen without smallpox scars.

The Italians undertook large scale vaccination and smallpox began to disappear. In 1937, 200,000 vaccinations were given in and around Addis Ababa as a small epidemic had occurred among the people living near the aerodrome. (In 1944, I saw a small outbreak at Sire, near Lekemti.)

Smallpox vaccine is being prepared in Addis Ababa, but until an adequate health service can be established this disease will continue to be a menace both to the Ethiopians and their surroundings.

Helminthic Diseases

The classical disease of Ethiopia is infection by the tapeworm *Taenia saginata*. All the old travelers have detailed descriptions of the eating of raw meat (*brindo*) and the ensuing tape-worm infection. Courbon's (1861) statement is a typical example:

> "Men and women, all and sundry, in this country, have the entozoon; and they take some *kouzzo* regularly every two months to prevent the more serious derangements, which it might cause."

Detailed descriptions of the special Ethiopian anti-helminthic, the so-called *kousso*, have been given in every book on Ethiopia, up to the latest. The professional medical writers have shown the same picture of the omnipresent tapeworm. I had long been skeptical about the frequency of tapeworm. Very little meat, raw or prepared, is eaten by the average Ethiopian, for the simple reason that he cannot afford it. The older travelers were describing special festivals in connection with arrival at distant places. At such occasions meat would be eaten. In a survey of three Ethiopian villages the U. S. Technical Project found tapeworm to be a comparatively rare disease, *Ascaris lumbricoides* being by far the most common helminthic parasite. Conditions are in most places favorable for the embryonation of the ova. The soil is heav-

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A characteristic case of elephantiasis vulvae.

ily polluted, and as no intermediary host is needed the infection is widespread. *Trichiuris trichiura* does not seem to be particularly common in Ethiopia. I found it in about 13 percent of stools in one of the villages examined. *Enterobius vermicularis* seems to be comparatively rare. *Trichinella spiralis* has not been reported from Ethiopia.

HOOKWORM DISEASE: So far little actual survey material is available. Naegelsbach (1934) states that hookworm infection is common in Gore. The disease is rare in the northern highland and seems also to be rare in Ogaden. The U. S. Technical Project found no hookworm in Ambo village at an elevation of 9,000 feet. In Shabe (elevation 6,000 feet), 26.6 percent of stools were found to contain hookworm. It is likely that the disease is most widespread in southwestern Ethiopia.

SCHISTOSOMIASIS: While this disease is quite common in Italian Somaliland, where *Schistosoma haematobium* has been found over a wide geographic range, it is extremely localized in Ethiopia. *Schistosoma haematobium* and *Schistosoma mansoni* infection were described in 1938 from Tigre and one case of *Schistosoma mansoni* infection was described in 1938 from Harar. The disease is rare in Ethiopia.

Fasciola hepatica is common in animals,

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164 but so far has never been found in human beings. The Echinococcus has been described by the Swedish physician, Dr. Hanner, in two cases from the hospital in Addis Ababa.

FILARIASIS: A considerable amount of filariasis has been described from Ethiopia and the illustration shows a typical clinical case. So far, nobody has been able to prove the presence of *Wuchereria bancrofti* although whole villages have been examined by day and by night. Much of the "elephantiasis" is no doubt surgical, but a large number of clinically typical cases of filariasis are found. *Loa loa* has not been described from Ethiopia. *Dracunculus medinensis* has only occurred where it was introduced from Arabia by traders and has not established itself in Ethiopia.

ONCHOCERCA VOLVULUS: In 1937-38, Giaquinto made a study of the insects of medical importance in Ethiopia. He reported the presence of *Simulium damnosum* in several localities in Galla Sidamo and suggested that onchocercosis might be present here. An expedition conducted by Giaquinto confirmed this. I studied this region in 1944 with Giaquinto and numerous cases of onchocerciasis were disclosed in a survey of the village of Shabe. Photophobia and diminished sight were common and the parasite was found in tumors that were removed. It is likely also that Gore, Lekemti, and Gardulla are endemic regions.

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A case of Onchocerca volvulus tumor.

[p. 720B]

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Onchocerciasis which has led to ocular involvement.

Diseases of the Skin

Diseases due to fungi are extremely common. Ringworm has been constantly described by Italian workers and was found by the U. S. Technical Project to be very common in children. A typical case of Achorion schoenleini is shown on this page.

Maduramycosis has been described by a number of writers. While there is no doubt as to the presence of a foot infection showing nodules on the external surfaces connecting up with granulomatous lesions of the interior of the foot, etiological work is so far not satisfactory in this field, and it is doubtful whether the organisms giving rise to mycetoma and to actinomycosis should be classified in one or two genera.

Tropical Ulcer: This is one of the most important of all the diseases in Ethiopia. It is the most common pathological entity, and it is likely that over 50 percent of the population suffers from this disease. It is therefore surprising to find that next to no work has been done on the etiology of this condition as seen in East Africa. There is an almost general agreement that it is an infectious condition in which spirochetes and fusiform bacilli are often found, and now and again "environmental conditions" are mentioned. The U. S. Technical Proj-

[P. 721 A]

164 ect came to the conclusion that tropical ulcer in Ethiopia must be classified as a "social disease." Filth, overcrowding and malnutrition are important factors, but even more decisive has been the displacement of tens of thousands of young Ethiopians by the Italian authorities during the occupation. It has been found that cases treated in hospitals will heal quickly, but when released to look out for themselves the patients soon "relapse." Vigorous attempts are now being made to achieve a simultaneous solution of both the medical and social problem.

Two parasitic skin diseases are extremely common. Scabies is almost universal and may be taken as an indication of the poor general hygiene. Chiggers have spread little by little over the whole of Ethiopia. The Ethiopians claim that the parasite was introduced into Ethiopia from Kenya over Moyale, the frontier village. In Ethiopia the disease is called "moyale."

Gastro-intestinal Disturbances

Both amebic and bacillary dysentery are common in Ethiopia. It is, however, surprising that so few amebic abscesses are found in this country. The illustration on p. 722 represents the only fair-sized amebic abscess the author saw during a year's survey. *Endamoeba histolytica* is endemic in

Infection with Achorion schoenleini (favus).

[p. 721 B]

●164

An Ethiopian suffering from amebiasis with liver abscess.

[R722 A]

large parts of Ethiopia, but many cases of so-called amebic dysentery are no doubt bacillary. Fundamental work is urgently needed in this field as gastro-intestinal disturbances are extremely common in Ethiopia. In most of the cases seen in Europeans no amebae were found. The *typhoid-paratyphoid* group of organisms seems to be of extremely little importance in Ethiopia. This is all the more peculiar as most water supplies are heavily polluted. Surveys have shown extremely low titres in Widal reactions for this group.

Dysentery due to *Giardia lamblia* has been described by Italian writers, but it would seem that only the simultaneous presence of diarrhoea and the parasite has been proved. The occurrence of "hill diarrhoea" was suggested by Singer in 1905. Izzo, in 1938, attempted to make a case for this sprue-like disease which he claims to have found in the "Ambas," the high, isolated plateaus.

Eye Diseases

Eye diseases are mentioned as important in all the older descriptions of Ethiopia. Conjunctivitis is no doubt one of the most common ailments in this country. Due to the lack of hygiene, especially in sandy regions, infected lesions of serious nature are not uncommon. Senile cataracts are common and many eye diseases are caused

10: Barkhuus D-5 (1944-1945) 1947
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by syphilis. It is not possible to estimate the amount of blindness due to gonorrhoeal infection, but it must be considerable. Trachoma is no doubt common in Ethiopia. It would, however, seem that the clinical forms are milder than those seen in Tunisia, Egypt, or the Balkans. It responds surprisingly well to treatment, but as treatment is hardly available outside the capital, complications of trachoma are seen all over the country.

Rarer "Tropical" Diseases

Leishmaniasis: Kala-azar no doubt occurs in Ethiopia along the Sudan-Ethiopian border. During the war it was found necessary to evacuate Galabat, and move the population of the border town elsewhere due to the occurrence of kala-azar. This disease has recently been described from the region just north of Lake Rudolph. Oriental boil (caused by *Leishmania tropica*) has been described from a number of places in Ethiopia, among these: Tigre, Gore, Gimbi, Lekemti, Jimma, Dalle, Diredawa and Harar.

Framboesia

Yaws is not a common disease of Ethiopia, while it is extremely common in Italian Somaliland. It has been described from the extreme western part of the country and quite recently (Cupi, 1943) from Amara.

[p. 722 ?]

10: Barkhuus D-5 (1944-1945) 1947
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Case of cutaneous leishmaniasis in South West Ethiopia.

No case has been described from Shoa or Harar. Italian reports state that there were 180 cases in Galla Sidama in 1937-38.

Trypanosomiasis

Although the appropriate glossinas are known to occur in the Omo and Didessa valleys, no cases of trypanosomiasis in human beings have been described. The disease in animals is a serious economic problem.

Non-Tropical Diseases

Most of the common non-tropical diseases occur in Ethiopia. In the highlands pneumonia is one of the most frequent causes of mortality. There is reason to believe that whooping cough is common, but little information is available. Varicella is quite common, while the reports on measles are conflicting. Naegelsbach (1934) declares that this disease is well recognized by the native population under the name *kufun*. I never saw a case or met anyone who had seen one. Scarlet fever does not seem to occur. Hardly any work has so far been done on brucellosis, but the U. S. Technical Project found indications that this disease most likely occurs among cattle in the Danakil region. No human case has been reported.

[p. 723 A]

164 The epidemiology of diphtheria in Africa is still little known. Schick tests have shown high immunity among Ethiopian children, but the occurrence of cases of clinical diphtheria in the native population is unknown.

Every year rabies has claimed a large number of Ethiopians. Until 1927 no treatment was available nearer than Cairo. [144] Since then, treatment has been given in Addis Ababa. The number of rabid dogs in Ethiopia is very large, but little is known of the number of persons bitten outside the capital. It is estimated that approximately 100 persons receive treatment in Addis Ababa every month.

Dengue is common in the northern part of the Harar plateau. It was found quite commonly among Italians at Diredawa and I can remember several fellow travelers coming down with this disease after a night spent in that town. Some control has been attempted since 1943, but until a health service is organized, effective control will not be possible.

Disease terms in Amharic:

164 192 A number of diseases have clear terms in the Amharic language. Of the venereal diseases, syphilis is referred to as *kitigne* in its early form while later manifestations are called *worde*. The rheumatic pains, *kurtemaat*, so frequently complained of, are often syphilitic. Gonorrhoea is generally called *chapto* (actually to squeeze, or it squeezes me). The word for malaria is *wobah* (r). *Nidad* (i.e., it caught fire) is also used, but may be used for several types of fever. Relapsing fever is called *mitch* and is generally differentiated by the population from typhus fever which is called *tessibo*. Smallpox is called *fantata* and chicken-pox is recognized as a distinct disease called *kuffin*. Diarrhoea is called *tekmat*, which literally means "what makes to sit down." In asking a patient whether he has fever, the word *tekusat* is used. The patient with fever will generally have put a band dipped in cold water around his head.

[p 723B]

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

in January. But the giant of holidays in this season is Epiphany, about a fortnight after Christmas. The holiday commemorates the baptism of Jesus; the name of the holiday, *Ṭimqat,* means "baptism." In preparation for Ṭimqat new clothes are given to children and the adults' *shammā,* grown very gray over the months, are washed in every household.

The program for Ṭimqat is long and complicated. At sunset on the eve of the holiday, the people don their white clothes and repair to the local church, from whence they escort the *tābot* to a place where it will spend the night—near some stream or pool. They go home for supper, and return to that site for singing and dancing until late at night. About two o'clock in the morning Mass is performed, after which quantities of *dābo* and *ṭallā* are consumed. Toward dawn, or shortly after, the clergy bless the water and sprinkle it on those assembled. Many like to bathe in the sanctified water at this time. It is the occasion for baptizing the children of syphilitic mothers and those who want to be rebaptized.

By noon on Ṭimqat Day a large crowd has assembled at the ritual site, those who went home for a little sleep having returned, and the holy ark is escorted back to its church in colorful procession. The clergy, bearing robes and umbrellas of many hues, perform rollicking dances and songs; the elders march solemnly with their weapons, attended by middle-aged men singing a long-drawn, low-pitched *haaa hooo;* and the children run about with sticks and games. Dressed up in their finest, the women chatter excitedly on their one real day of freedom in the year. The young braves leap up and down in spirited dances, tirelessly repeating rhythmic songs. When the holy ark has been safely restored to its dwelling-place, everyone goes home for feasting. In the meantime, the eyes of gamesome men and women have met and secret rendezvous have been arranged.

Ṭimqat ushers in a season of weddings, which comes to an abrupt end with the onset of the great fast before Easter. For eight long weeks, body and spirit are depressed by the heavy fasting requirements. The mood reaches a climax in the final week of Lent. Then no heavy work is allowed, and the more devout peasants go to church many times and intensify their daily schedule of prayers. Total abstinence is practiced for the forty-eight hours preceding the final Mass, performed in the middle of the night before Easter.

Gluttony follows this long deprivation. It is a season of the highest spirits. For eight weeks the inexorable requirement to fast on Wednesdays and Fridays is waived. The bins are full with the harvest of wheat, barley, and chick-peas. New crops of pulse start to appear in the fields. It is the most favored time of all for weddings.

And then, as the Amhara themselves view it, June brings another time of sadness. With the onset of the heavy rains come attacks of malaria in the lowlands, typhus in the highlands. Swollen streams make travel difficult and

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

hazardous. Moisture and chill lower the resistance of man and beast to respiratory infections. The weekly fasting schedule is resumed, and the more devout observe the thirty-day fast of the Disciples. In August, finally, the sixteen-day fast in honor of the Assumption of Mary is observed by everyone older than six or seven years.

On the thirteenth day of that fast occurs the strange holiday of Buhē. Before and during this day, which is marked by the baking of special *dābo* for the shepherds, the countryside crackles with the reports of shepherds' whips. In this season when the humid air lends an explosive sound, the shepherds crack their whips for fun; but older boys and men join in great whipping battles on Buhē,* in which two teams lash each other until the members of one can stand it no more. On the evenings of Buhē, small bonfires are lit all over the countryside, and more *dābo* is eaten and whips cracked.[5] A few days later the fast of the Assumption is over. Young and old look forward to the end of the rains and the festivities that commence with the new year.

These are the days and years of the Amhara peasant. Some other aspects of his life that come to the fore when more analytic perspectives are applied will be discussed in later chapters. But this calendar of activities forms the immediately observable setting for the "inner world" of the Amhara peasantry: those ideas, sentiments, and values which constitute its outlook on life.

THE WORLD OF MEANING

The Natural Universe

The Amhara peasant is not familiar with most of the cosmological notions found in the Great Tradition of Abyssinian culture, as transmitted through books like *Qalamsis* and *Aksimareos*, and the oral traditions of learned churchmen. It is unusual for him to have a precise image of the layers of water, fire, and air beneath the earth, and it is still less likely for him to be familiar with the complicated hierarchy of invisible worlds, watery skies, and seven "real" heavens which are enumerated in the Abyssinian cosmology. He believes that stars influence human affairs, but leaves the possession of astrological knowledge to the *dabtarā*. The presence of cultural specialists who know about such matters has relieved him of the burden of dealing with ideas about the cosmos, ideas which are more widely diffused in more homogeneous societies.

The peasant's working conception of the cosmos is thus a very simplified version of that of his Great Tradition, together with certain pagan notions. Like his more learned countrymen, he divides the universe into two main parts: the world, *alam*, consisting of the earth, sun, moon, and stars; and

* This custom is now extinct in many Amhara areas.

11:Levine Z-4,5 (1958-1961)1965 MP5 Amhara MP5

paid increased attention in recent years. A new phase of public health endeavor in this decade was marked by the imposition of a nationwide health tax in 1960.

Health has become a prime objective in Ethiopia's modernization program because of a growing realization that the wide prevalence of malaria, tuberculosis, typhus, intestinal parasites, syphilis, trachoma, leprosy, and other diseases continues to sap the vitality of the nation's productive forces and to visit misery on countless peasant families. The public health forces in Ethiopia (Ministry of Public Health, WHO mission, and AID Public Health Division) have long understood that Ethiopia's health needs cannot be met by piecemeal therapy. They have undertaken a program of preventive measures by preparing public health teams in the medical college at Gondar. The college trains health officers, community nurses, and sanitarians within a common framework, so that when they go into the field they will understand each other's tasks from the start. The first public health center employing such a team was opened in the late fifties; Ethiopia's Second Five-Year Plan envisions one such center for every fifty thousand people by 1967.

The objective of these public health workers is to transmit a number of instructions—concerning personal hygiene, environmental sanitation, early care for illness, and isolation of contagious diseases—which are at variance with customary beliefs and practices. Experience with comparable programs elsewhere suggests that the success of such health teams is by no means assured.[18] What are the forces working for and against the acceptance of these new instructions by the Amhara peasantry? Both negative and positive factors may be identified with respect to each of the three general categories previously referred to: the general outlook regarding change; attitudes toward the agents of change; and degree of compatibility between the new cultural items and the old.

The Amhara peasant's general resistance to change may be presumed operative here as elsewhere, particularly since health practices are often associated with religious beliefs and sentiments. Defense of indigenous therapies has in fact become a significant channel for the expression of traditionalist sentiment, a channel that has even been utilized on occasion in the Addis Ababa newspapers.[19] And a general posture of resistance to changes in the field of health is supported by the interests of traditional practitioners, *dabtarä* and *ṭanquāy*, who are in danger of losing clientele if modern-trained health workers come to win their allegiance.

Counter to this conservative drag, on the other hand, is the peasant's powerful desire for one basic change in his life circumstances, namely, the reduction of morbidity and mortality. Despite his idyllic conception of paradise and his frequent contention that life on earth is something of little value, the Amhara wants to avoid death. Even from the religious point of view he is

Young E-4,5 (1966) 1971 MP5 Amhara MP5
Begemder

criteria. His personal interest means to the student rapid advancement through the curriculum, dining at the master's table, and enjoying privileged information of a non-ecclesiastical nature. Without his patronship, a student is committed to years of uncertainty and physical misery, scraping to meet his subsistence needs, paying his "tuition" in demeaning services, such as gathering the master's wood and tilling his garden, and in deferential performances, particularly washing the master's feet and those of his visitors.

The kiyne student is further troubled by the many ailments which are his lot. He lives, with one or two of his mates, in a wretched lean-to of twigs and wild grasses, which proves to be poor protection against the cold winter rains. Often he owns only the toga on his back, and it, like him, remains unwashed for the duration of the long dry season. Thus, ikek (scrofula) becomes his badge, and kurtimat (joint pains) and weba (fever) his recurrent companions. The student's diet is his special concern, since it conspicuously lacks the combination of wholesome wot (stew) and injera (pancake-like bread) necessary to sustain good health. He obtains most of his food by begging in the town and local hamlets, where he generally receives scraps of stale injera bread, always inadequate and potentially pathogenic (i.e., likift bearing, threatening fever and

severe abdominal pain). The wot he eats is invariably the humblest type, aliyca, lacking the cayenne-based ingredient (berberiy) necessary to man and digestive wosfat. The injera is made of pulses instead of proper cereals, and often he has nothing but a handful of parched grain (kolow) with which to satisfy his hunger and truculent wosfat. In addition to persistent abdominal complaints (yihod himem), students are often afflicted with dafint (night-blindness) which is particularly stressful in the context of the student's nocturnal activities.

There is also danger from animals, the vicious and often rabid hamlet dogs, which plague him as he begs; from ganels which gather outside the church yard waiting to suffocate him in his sleep, to tempt him to sacrilege with their calls just as they tempted Saint Basil, to waylay him when he goes beyond the church yard for nocturnal urination.

The Growth of Mercantile Interests. With the exception of those few students who enjoy the kiyne master's patronage, or who receive parental support, the young scholars must periodically interrupt the course of study for excursions into the lowlands in order to meet their subsistence needs. In early September, after the rains have ended and the countryside is covered with verdure, kiyne students journey to the kola lands to gather the wild gramta grass. The gramta must be sun dried for